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CONFIRMATION NO. 3318

SERIAL NUMBER 10/757,362	FILING OR 371(c) DATE 01/14/2004 RULE	CLASS 433	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. 9482a
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APPLICANTS

Gina Dellanina, Irvine, CA;

** CONTINUING DATA *****

This appln claims benefit of 60/440,134 01/15/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
04/19/2004

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 1	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>[Signature]</u> Initials				

ADDRESS

21905

TITLE

Dental hygiene device & teeth polishing method

FILING FEE RECEIVED 622	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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